

03-14-01

PTO/SB/05 (11-00)

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 109.779.128

First Inventor Scott G. Newnam et al.

Title System and Method for Operating Internet-Based

Express Mail Label No. EL301006762US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original and a duplicate for fee processing)*
2.  Applicant claims small entity status.  
See 37 CFR 1.27.
3.  Specification [Total Pages 20]
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (*if filed*)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.  Drawing(s) (35 U.S.C. 113) [ Total Sheets 7 ]
5. Oath or Declaration [ Total Pages  ]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63 (d))  
*(for continuation/divisional with Box 18 completed)*
    - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6.  Application Data Sheet. See 37 CFR 1.76

**ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (*if applicable, all necessary*)
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or
    - ii.  paper
  - c.  Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9.  Assignment Papers (cover sheet & document(s))
10.  37 CFR 3.73(b) Statement  Power of *(when there is an assignee)*  Attorney
11.  English Translation Document (*if applicable*)
12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503) *(Should be specifically itemized)*
15.  Certified Copy of Priority Document(s) (*if foreign priority is claimed*)
16.  Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17.  Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation     Divisional     Continuation-in-part (CIP)    of prior application No.: \_\_\_\_\_ / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

Group Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label	<i>(Insert Customer No. or Attach bar code label here.)</i>					<input checked="" type="checkbox"/> Correspondence address below
Name	Michael A. Diener, Reg. No. 37,122					
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	60 State Street					
City	Boston	State	MA	Zip Code	02109	
Country	U.S.	Telephone	617-526-6454	Fax	617-526-5000	
Name (Print/Type)	Michael A. Diener		Registration No. (Attorney/Agent)	37,122		
Signature	<i>Hollie L. Baker; Reg. 31,321 for Michael Diener</i>		Date	03/13/01		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 620.00)

## Complete if Known

Application Number	TBA
Filing Date	March 13, 2001
First Named Inventor	Scott G. Newnam et al.
Examiner Name	TBA
Group Art Unit	TBA
Attorney Docket No.	109.779.128

METHOD OF PAYMENT		FEE CALCULATION (continued)					
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:							
Deposit Account Number	08-0219						
Deposit Account Name	Hale and Dorr LLP						
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17							
<input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27							
2. <input type="checkbox"/> Payment Enclosed:		Check	Credit card	Money Order	<input type="checkbox"/>	Other	
FEE CALCULATION							
1. BASIC FILING FEE							
Large Entity		Small Entity					
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description			
101	710	201	355	Utility filing fee			
106	320	206	160	Design filing fee			
107	490	207	245	Plant filing fee			
108	710	208	355	Reissue filing fee			
114	150	214	75	Provisional filing fee			
				SUBTOTAL (1) (\$ 355.00)			
2. EXTRA CLAIM FEES							
Total Claims		Extra Claims	Fee from below	Fee Paid			
45	-20** = 25	x 9.00	= 225.00				
Independent Claims	3	- 3** = 0	x --	= --			
Multiple Dependent			--	= --			
Large Entity		Small Entity					
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description				
103	18	203	9	Claims in excess of 20			
102	80	202	40	Independent claims in excess of 3			
104	270	204	135	Multiple dependent claim, if not paid			
109	80	209	40	** Reissue independent claims over original patent			
110	18	210	9	** Reissue claims in excess of 20 and over original patent			
				SUBTOTAL (2) (\$ 225.00)			
*or number previously paid, if greater; For Reissues, see above							
*Reduced by Basic Filing Fee Paid							
SUBTOTAL (3) (\$ 40.00)							

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SUBTOTAL (3) (\$ 40.00)

SUBMITTED BY		Complete if applicable		
Name (Print/Type)	Michael A. Diener	Registration No. (Attorney/Agent)	37,122	Telephone
Signature	Hollie L. Baker, Reg. 31,321 for Michael Diener		Date	3/13/2001

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